



NEW HAMPSHIRE
DEPARTMENT OF
**Environmental
Services**

HAZARDOUS WASTE ACTIVITY NOTIFICATION FORM

NH DES Waste Management Division-RIMS
6 Hazen Drive, Concord NH 03301
(603) 271-2901 or (603) 271-2921

Shaded box for NH DES
Office Use Only

EPA ID No. **NHD 519.987.458**

MTS

RCRAInfo

1. Reason for
Submittal

Check correct box:

- ☐ To provide **initial notification** (to obtain an EPA ID Number for hazardous waste, including universal waste, or used oil activities).
- ☒ To provide **subsequent notification** and/or update biennial reporting data (to update site identification information). Reason: name change

2. Site Name

Company Name: Ralph's Auto Body Shop

3. Site Location
Information

Street Address:

123 Main St

City or Town:

Concord

State:

NH

County Name:

Merrimack

Zip Code:

03301

4. Site Land Type

Site Land Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other _____

5. North American
Industry
Classification System
(NAICS) Code(s) for
the Site

A.

81121

B.

C.

D.

6. Site Contact
Person

First and Last Name:

Smith, John

Title:

OWNER

Phone Number:

(603) 555-1234

Phone Number Extension:

X 123

7. Site Mailing
Address

Street or P. O. Box:

P.O. BOX 456

City or Town:

Concord

State:

NH

Zip Code:

03301

8. Legal Owner
and/or Operator of
the Site
(List additional
owners or operators
in the comments
section.)

Name of Site's Legal Owner/Operator:

Robinson, Richard

Date Became Owner /Operator

(mm/dd/yyyy): 10/01/99

Street or P. O. Box:

P.O. Box 1080

Phone Number:

603.123.4567

City or Town:

Anytown

State:

NH

Zip Code:

03333

Owner /Operator Type: ☒ Private ☐ Federal ☐ Municipal ☐ State ☐ Other _____

9. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes):**A. Hazardous Waste Activities:****1. Generator of Hazardous Waste**

(Choose only one of the following three categories.)

NH Full Quantity Generator (FQG)

- ☐ a. Federal LQG: Greater than 1,000 kg/mo (2,200 lbs.) of *non-acute* hazardous waste; or Generated in a calendar month or accumulated at any time greater than 1 kg (2.2 lbs) or more of *acute* waste
- ☐ b. Federal SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of *non-acute* hazardous waste

NH Small Quantity Generator (SQG)

- ☒ c. Federal CESQG: Less than 100 kg/mo (220 lbs) of *non-acute* hazardous waste

In addition, indicate other generator activities (check all that apply).

- ☐ d. United States Importer of Hazardous Waste
- ☐ e. Mixed Waste (hazardous and radioactive) Generator

For Items 2 through 5, check all that apply.

- ☐ 2. **Transporter of Hazardous Waste** Note: A hazardous waste transporter registration may be required for this activity.
- ☐ 3. **Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity.
- ☐ 4. **Recycler of Hazardous Waste (at your site)** Note: A hazardous waste permit may be required for this activity.

5. Consolidation of Small Quantity Waste

- ☐ a. This site will accumulate waste from NHSQG sites owned by the same owner. (Please be sure that the box checked off at item 9A1 reflects the additional quantities of waste received.) Please list the EPA ID numbers of the sites from which this site will receive waste from: _____
- ☐ b. This site is a NH small quantity generator that will self transport its waste to another site owned by the same owner. Please list the EPA Identification number for the receiving site: _____

B. Universal Waste Activities:**1. Indicate types of universal waste generated and/or accumulated at your site.**

(check all boxes that apply):

- a. Batteries ☒
- b. Pesticides ☐
- c. Thermostats ☐
- d. Lamps ☐
- e. Antifreeze ☒
- f. Mercury Containing Devices (excluding Thermostats) ☐
- g. Cathode Ray Tubes ☐

2. Total quantity of Universal Waste on site at any time.

- ☐ a. Greater than 20,000 kg (44,000 lbs); VLQH
- ☐ b. Greater than 5,000 kg but less than 20,000 kg (11,000 lbs to 44,000 lbs); LQH
- ☒ c. Less than 5,000 kg (11,000 lbs); SQH

3. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities:**1. Used Oil Transporter - Indicate Type(s) of Activity(ies)**

- ☐ a. Transporter
- ☐ b. Transfer Facility

2. Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Processor
- ☐ b. Re-refiner

3. Used Oil Burner

- ☐ a. Off-Specification
- ☐ b. Specification

4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies)

Spec	Off-Spec	
<input type="checkbox"/>	<input type="checkbox"/>	a. Marketer who directs shipment of used oil to a used oil burner
<input type="checkbox"/>	<input type="checkbox"/>	b. Marketer who collects and blends or processes used oil collected
<input type="checkbox"/>	<input type="checkbox"/>	c. Marketer who collects and distributes used oil collected

5. ☐ Used Oil Collection Center accepting used oil other than household "Do-It-Yourselfer"**6. ☐ Aggregation Point**

EPA ID No. NHD519.987.458

10. Description of Hazardous Wastes. Please list the waste name, source code, waste numbers and estimated monthly volume of the hazardous waste handled at your site. Use all waste codes for each waste stream (federal waste codes take precedence over state waste codes). Use an additional page if more spaces are needed.

Waste Name	Source Code	EPA/State Waste Numbers	Estimated Monthly Volume
Waste oil		NH01	8 gal
Paint Related Materials		D001	11 gal

11. Comments:

12. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of owner, operator, or an authorized representative	Name and official title (type or print) of owner, operator, or an authorized representative	Date Signed (mm-dd-yyyy)
<i>Rich Robinson</i>	Richard Robinson	10/5/01